WED 09:50 FAX 610 270 4440

GLAXOSMITHKLINE

01 FC:1501 02 FC:8001 1400.00 DA 6.00 DA

Ø 001

PART B - FEE(S) TRANSMITTAL

and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Al xandria, Virginia 22313-1450

(7(3) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICAT IN FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of a intenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new corre-nondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Uso Block I for any change of address)

20462

7590

01/14/2005

SMITHKLINE BEECHAM CORPORATION CORPORATE INTELLECTUAL PROPERTY-US, UW2220 P.O. BOX 1539 KING OF PRUSSIA, PA 19406-0939

Now: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying pap. rs. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I be by certify that this Foc(6) Transmittal is being deposited with the United Stars Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Murie Williams (Signatu **′13/0**5 (Date

FIRST NAMED INVENTO ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. PILING DATE 6144 P3Z333 David Thomas Davies 10/018,900 08/01/2002

TITLE OF INVENTION: QUINOLINE DERIVATIVES AS ANTIBACTERIALS

APPLN, TYPS	SMALL ENTITY	ISSUE FEE		PUBL	ATION FRE	TOTALF	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1400)	<u> </u>	\$0	\$1	400	04/14/2005
PXAMINER		ART UNIT		CLAS	-SUBCLASS	7		
MCKENZIE, THOMAS C		1624		51	-230500	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the atent front page, list (1) the names of up t 3 registered patent attorneys or agents OR, alternatively, (2) the name of a sine e firm (having as a member a registered attorney or gent) and the names of up to 2 registered patent att theys or agents. If no name is listed, no name will b printed.					
PLEASE NOTE: Unles recordation as set forth i	D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion NEE eecham p-1.c.	clow, no assignee of this form is NO (F	data will ap T a substitute 3) RESIDEN	pear on the for filing as CE: (CITY p	eatent. If an assig assignment. and STATE OR CO.	UNTRY)		
Please check the appropria	te assignee category or catego				l (ndividual 🗷 (Corporation or	other private g	roup entity Government
40. The following fcc(s) are enclosed:			4b. Payment of Fee(s):					
Issue Fee			A check in the amount of the fee(s) is enclosed.					
Publication Fee (No small entity discount permitted)		cd)	Payment by credit c: 'd. Form PTO-2038 is attached.					
Advance Order - # of Copies 2			The Director is ben-ny authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-25 to charge the required fee(s), or credit any overpayment, to					
u. Applicant claims	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.			ger claiming SMA			
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the ro) is requested to apply the Iss Publication Fee (if required) cords of the United States Par	us res and Publics will not be accepte tent and Trademurk	d from anyon Office.	or to re-	he applicant; a re	gistered attorn	cy or agent; or	the assignee or other party in
	Mol m	50-41	71			72 5/	13 61	185

This collection of information is required by 37 CFR 1,311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is extended to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing for instance of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND PHES OR COMPLETED FORMS O THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Registration No. 323917

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of juformation unless it displays a valid OMB control number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

Typed or printed name Hary McCarthy

Authorized Signature

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE